

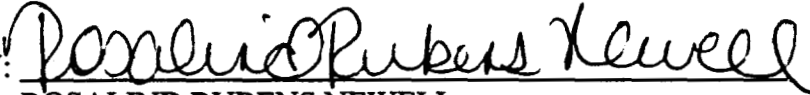
Entered 10-08-99 - sb
CL 99L0651 - ALEXIS HOLMES

00-*R*-1764

CLAIM OF: **KATRINA D. BOYD**
1212 Utoy Springs Road
Apartment 3
Atlanta, Georgia 30331

For damages alleged to have been sustained as a result of
vehicular damage due to an open road cut on September 20, 1999
at 1212 Utoy Springs Road.

THIS ADVERSED REPORT IS APPROVED

BY: 
ROSALIND RUBENS NEWELL
DEPUTY CITY ATTORNEY

DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY

Claim No. 99L0651

Date: 10/19/00

Claimant /Victim KATRINKA D. BOYD

BY: (Atty) _____

Address: 1212 Utoy Springs Road, Apartment 3, Atlanta, Georgia 30331

Subrogation: _____ Claim for Property damage \$ _____ Bodily Injury \$ _____

Date of Notice: 10/01/99 Method: Written, proper X Improper _____

Conforms to Notice: O.C.G.A. §36-33-5 X Ante Litem (6 Mo.) X

Date of Occurrence 09/20/99 Place: 1212 Utoy Springs Road

Department _____ Division: _____

Employee involved _____ Disciplinary Action: _____

NATURE OF CLAIM: Claimant allege that she sustained damage to her vehicle when she hit a huge manhole. An investigation determined that United Water Services Atlanta performed work at the incident location. The original claim was sent to United Water Services Atlanta for resolution, and claimant was paid by United Water Services Atlanta on May 7, 2000, by check in the amount of \$845.00.

INVESTIGATION:

Statements: City employee _____ Claimant _____ Others _____ Written _____ Oral _____

Pictures X Diagrams _____ Reports: Police _____ Dept Report _____ Other X

Traffic citations issued: City Driver _____ Claimant Driver _____

Citation disposition: City Driver _____ Claimant Driver _____

BASIS OF RECOMMENDATION:

Function: Governmental _____ Ministerial _____

Improper Notice _____ More than Six Months _____ Other _____ Damages reasonable _____

City not involved X Offer rejected _____ Compromise settlement _____

Repair/replacement by Ins. Co. _____ Repair/replacement by City Forces _____

Claimant Negligent _____ City Negligent _____ Joint _____ Claim Abandoned _____

Respectfully submitted,


INVESTIGATOR - ALEXIS HOLMES

RECOMMENDATION:

Pay \$ _____ Adverse X Account charged: 1A01 _____ 2J01 _____ 2H01 _____

Claims Manager:  Concur/date 11-20-00

Committee Action: _____ Council Action _____

COUNCIL OF THE CITY OF ATLANTA
CLERK OF COUNCIL
City Hall
55 Trinity Avenue, S.W.
Atlanta, Georgia 30335

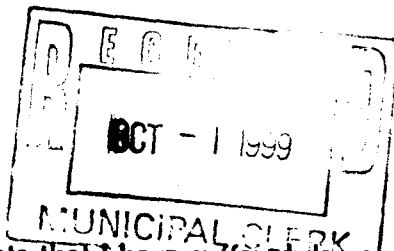
RE: CLAIM FOR DAMAGES

Today's Date: Sept 22, 1999

ENTERED - 10-8-99 - SB
99L0651 - DOBBS JORDAN

Dear Clerk of Council:

This is to notify the City of Atlanta that I have suffered damages in the amount sum of \$ 845.06 property and/or \$ _____ bodily injury for which I contend the City is liable.



1. Date of incident: 9/20/99 (month/day/year)
2. Police called: X Yes No
3. Location of incident: UTOY SPRINGS Road
4. Name of your insurance company: TRC Insurance Services Policy No. BINDER 091599-01
5. State what and how incident occurred: On September 20, 1999 I drove up Utoy Springs Rd made a left turn at second light on Cascade Road across from BP station and McDonald's, at 9:47pm. I tried to avoid a huge manhole and drove into it.
6. ALL ESTIMATES AND DAMAGES ARE SUBJECT TO INSPECTION. THE MAKING OF FALSE CLAIMS WILL RESULT IN YOUR CLAIM BEING DENIED AND MAY RESULT IN CRIMINAL PROSECUTION!

7. The registered owner must make the claim for vehicle damages, complete the following and attach two (2) estimates of repair and proof of ownership of your vehicle (copy of the current tag receipt or title).

Your vehicle: BMW 1997 830 MDY KATRINKA BOYD
(make) (year) (tag number) (driver's name)

City name: _____
(make) (City driver's name) (department/bureau)

8. Witness: _____
(name) (address) (telephone number)

9. The acknowledgement of this claim in no way waives the Governmental immunity of the City of Atlanta, as granted by State law, nor is it an admission of liability on behalf of the City of Atlanta and/or its employee(s).

10. This claim should be mailed immediately to the address shown above.

I HEREBY SWEAR OR AFFIRM THAT THE ABOVE INFORMATION IS TRUE AND CORRECT.

KATRINKA DOREEN BOYD
(claimant's name)

APT. 3 1212 UTOY SPRINGS RD
(address)

ATLANTA, GEORGIA 30331
(city and state)

678-339-5015 EXT. 6006
(work number) (home number)

00-R-1764
10-01-99P05:50 RCVD

9-27-99

To Whom It May Concern,

Please, feel free to
come and inspect my car.

My working hours
next week are 12 p.m. to
8:30 p.m. Monday thru
Friday.

Sincerely,

Katrina Boyd